

**STATE OF NEBRASKA**

DEPARTMENT OF HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE - Credentialing Division
P.O. Box 94986, Lincoln, Nebraska 68509-4986
402-471-2117

APPLICATION FOR A FUNERAL DIRECTING AND EMBALMING APPRENTICE REGISTRATION

Please Type or Print Clearly – It is your responsibility to submit or request to have submitted all required supporting documents. Failure to do so could result in a delay in processing your application.

SECTION A - APPRENTICE INFORMATION (All applicants must complete this section) This information is public and on the INTERNET under www.hhs.state.ne.us/lis/lisindex.htm

1.	Name	First:	Middle/MI:	Last:
2.	Mailing Address:	Street/PO/Route:		
		City:	State:	Zip:
3.	OPTIONAL –Telephone:			
4.	Social Security Number #:	Social Security #: (this is NOT public information and will not be on the Internet) It is required for child support enforcement purposes; and for potential disclosure of reportable actions to the Federal department of Health and Human Service's Healthcare Integrity and Protection Data Bank (HIPDB)		
5.	Date of Birth:	Date:	6.	Place of Birth:

SECTION B - FUNERAL DIRECTING AND EMBALMING SUPERVISOR

Name of Supervisor:	License #:
Name of Back-up Supervisor (if applicable):	License #:

SECTION C – NAME AND LOCATION WHERE APPRENTICESHIP WILL BE COMPLETED – DATE TO BEGIN

1	Establishment Name:			
2	Establishment Address:	Street/PO/Route:		
		City:	State:	Zip:
3	Date Apprentice is proposed to begin:			

SECTION D - REGISTRATION CATEGORY (All applicants must check the appropriate process by which they will be serving the apprenticeship)

<input type="checkbox"/>	Full 12 month service as an apprentice (the applicant must have completed at least 39 of the required 60 hours of pre-mortuary education, submit a pre-mortuary transcript, evidence of completing mortuary school and successful completion of the National Standardized Examination)	FEE: \$10
OR SPLIT APPRENTICESHIP		
<input type="checkbox"/>	First 6 month service as an apprentice (this service must be completed prior to attending mortuary school. A student may not earn more than 6 months of service, nor less than 6 months if utilizing a split-apprenticeship. The applicant must have completed at least 39 of the required 60 hours of pre-mortuary education and must submit a pre-mortuary transcript.	FEE: \$10
<input type="checkbox"/>	Final 6 month service as an apprentice (the applicant must submit evidence of completing mortuary school and successful completion of the National Standardized Examination)	NO FEE

Make fee payable to "Credentialing Division"

SECTION E - ATTESTATION (The supervisor, back-up supervisor and apprentice must sign this application) An individual who practices prior to issuance of a credential is subject to assessment of an Administrative Penalty of \$10 per day up to \$1,000, or such other action as provided in the statutes and regulations governing the credential.

SUPERVISOR(S):

I hereby state that I am the person making application, I am of good moral character, and the statements on this application are true and complete.

Signature of Supervisor: _____

Signature of Back-up Supervisor: _____

APPRENTICE APPLICANT:

I hereby state that I am the person making application, I am of good moral character, and the statements on this application are true and complete.

I further state that:

☐ I have not practiced in Nebraska prior to this application for licensure; **or**

☐ I have practiced for in Nebraska prior to this application for licensure:

_____ number of days in Nebraska prior to July 1, 2004

_____ number of days in Nebraska after July 1, 2004

Signature of Apprentice: _____

date: _____

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**EDUCATIONAL REVIEW FORM
FUNERAL DIRECTING AND EMBALMING**
SECTION A - APPRENTICE INFORMATION (All applicants must complete this section)

Name:	First:	MI:	Last:
Address:	Street/PO/Route:		
	City:	State:	Zip:

SECTION B - EDUCATION (The following section must be completed by all applicants. All courses must have been completed independently from coursework completed in mortuary science college and used towards a mortuary science certificate or degree. Within these 60 semester hours, you must complete the specified semester hours in the areas identified below. To assist this review process, if the title does not clearly reflect the content, please attach a course description. *A transcript verifying completion of this coursework must be submitted.*

NOTE: Quarter hours are calculated into semester hours as follows:

of quarter hours x .666 = # of semester hours

English – at least 6 semester hours	Course Code and Course Title:	College/University:	Credit Hours:
Accounting – at least 6 semester hours	Course Code and Course Title:	College/University:	Credit Hours:
Chemistry – at least 8 semester hours	Course Code and Course Title:	College/University:	Credit Hours:
Biology relating to the Human Body – at least 12 semester hours	Course Code and Course Title:	College/University:	Credit Hours:
Psychology / Counseling – at least 6 semester hours	Course Code and Course Title:	College/University:	Credit Hours:

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CHANGE OF FUNERAL DIRECTING & EMBALMING APPRENTICE SUPERVISOR

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SECTION A – APPRENTICE INFORMATION (All applicants must complete this section)

Name:	First:	MI:	Last:
Address:	Street/PO/Route:		
	City:	State:	Zip:

SECTION B – INFORMATION REALTING TO NEW SUPERVISOR

Name of Supervisor:	License #:
Name of Back-up Supervisor (if applicable):	License #:
Date change will become effective:	

SECTION C – ESTABLISHMENT WHERE YOU WILL NOW BE APPRENTICING

Establishment Name:			
Address:	Street/PO/Route:		
	City:	State:	Zip:
Date change will become effective:			

SECTION D - ATTESTATION (The supervisor, back-up supervisor and apprentice must sign this application)
SUPERVISOR(S):

I hereby state that I am the person making application, I am of good moral character, and the statements on this application are true and complete.

Signature of Supervisor: _____

Signature of Back-up Supervisor: _____

APPRENTICE:

I hereby state that I am the person making application, I am of good moral character, and the statements on this application are true and complete.

Signature of Apprentice: _____